

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 06, 2009
Secretary of State

DOCUMENT# N05000003018

Entity Name: CHAMPIONS GREEN CONDOMINIUM III ASSOCIATION, INC.**Current Principal Place of Business:**12734 KENWOOD LANE
STE 49
FT MYERS, FL 33907**New Principal Place of Business:**6719 WINKLER RD. STE. 200
FT MYERS, FL 33919**Current Mailing Address:**12734 KENWOOD LANE
STE 49
FT MYERS, FL 33907**New Mailing Address:**6719 WINKLER RD. STE. 200
FT MYERS, FL 33919**FEI Number:** 20-2609529**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TROPICAL ISLES MANAGEMENT
12734 KENWOOD LANE, SUITE 49
FORT MYERS, FL 33907 US**Name and Address of New Registered Agent:**ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER RD. STE. 200
FORT MYERS, FL 33919 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN M. STROHM, AGENT

05/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLARK, GARY
Address: 11951 CHAMPIONS GREEN WAY #407
City-St-Zip: FORT MYERS, FL 33907

Title: VP () Delete
Name: KREDELL, MARK J
Address: 1611 MAYFAIR ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: ST () Delete
Name: TILICKI, CAROL
Address: 11971 CHAMPIONS GREEN WAY, UNIT #503
City-St-Zip: FORT MYERS, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL M. TILICKI

TS

05/06/2009

Electronic Signature of Signing Officer or Director

Date